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## BIB DATA SHEET

CONFIRMATION NO. 5466

|   |   |  |   |  |                           |                                |
|---|---|--|---|--|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/814,441  | <b>FILING or 371(c) DATE</b><br>03/31/2004<br><b>RULE</b>   | <b>CLASS</b><br><del>705</del><br><b>703</b>             | <b>GROUP ART UNIT</b><br>2123   | <b>ATTORNEY DOCKET NO.</b><br>5853-406-1 |                           |                                |
| <b>APPLICANTS</b><br>Deniz Erdogmus, Gainesville, FL;<br>Jose Carlos Principe, Gainesville, FL;<br>Yadunandana Nagaraja Rao, Gainesville, FL;<br><b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/459,285 03/31/2003<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>08/11/2004 |   |  |   |  |                           |                                |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/MARY C JACOB/</u><br>Examiner's Signature  |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>FL   | <b>SHEETS DRAWINGS</b><br>3              | <b>TOTAL CLAIMS</b><br>57 | <b>INDEPENDENT CLAIMS</b><br>6 |
| <b>ADDRESS</b><br>AKERMAN SENTERFITT<br>P.O. BOX 3188<br>WEST PALM BEACH, FL 33402-3188<br>UNITED STATES  |   |  |   |  |                           |                                |
| <b>TITLE</b><br>Accurate linear parameter estimation with noisy inputs  |   |  |   |  |                           |                                |
| <b>FILING FEE RECEIVED</b><br>912   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                           |                                |